ATTACHMENT B Services and Procedure Codes

Recommendations

			Enhanced		
Current Services	Code	Basic	Benefit	Medicaid	Recommendations
Medication Administration	90782	Х	Х	Х	
					Incorporated into Diagnostic
Clinical Intake	90801				Assessment
Interactive Evaluation	90802		Х	Х	
Individual Therapy (20-30 min.)	90804	Х	Х	Х	
Individual Therapy (20-30 min.)MD	90805	Χ	X	X	
Individual Therapy (45-50 min.)	90806	Х	X	X	
Individual Therapy (45-50 min.)MD	90807	Χ	X	X	
Individual Therapy (75+ min.)	90808	Χ	X	X	
Individual Therapy (75+ min.)MD	90809	Χ	X	X	
Interactive Therapy (30 min.)	90810	Χ	X	X	
Interactive Therapy (30 min.)MD	90811	Χ	X	X	
Interactive Therapy (50 min.)	90812	Χ	X	X	
Interactive Therapy (50 min.)MD	90813	Χ	X	X	
Interactive Therapy (80 min.)	90814	Χ	X	X	
Interactive Therapy (80 min.)MD	90815	Χ	Χ	Χ	
Individual Therapy (30 min.)	90816	Х	Χ	Χ	
Individual Therapy (30 min.)MD	90817	Χ	X	X	
Individual Therapy (50 min.)	90818	Χ	Χ	X	
Individual Therapy (50 min.)MD	90819	Χ	Χ	X	
Individual Therapy (80 min.)	90821	Χ	Х	Χ	
Individual Therapy (80 min.)MD	90822	Χ	Х	Χ	
Interactive Therapy (30 min.)	90823	X	Х	Χ	
Interactive Therapy (30 min.)MD	90824	Х	Χ	Χ	
Interactive Therapy (50 min.)	90826	Х	Χ	Χ	
Interactive Therapy (50 min.)MD	90827	X	Х	Χ	
Interactive Therapy (80 min.)	90828	Х	Χ	Χ	
Interactive Therapy (80 min.)MD	90829	Х	Χ	Χ	
Family Therapy without patient	90846	X	Χ	Χ	
Family Therapy with patient	90847	Χ	X	X	

Soloup Therapy (non-multiple family group)	O Theres (Maritimle Ferrille O)	00010	V	V	lv l	
Medication Check-Individual 90862 X X X Speech Eval 92506 X X X Speech Therapy 92507 X X X X Speech Therapy 92508 X X X X A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A A	Group Therapy (Multiple Family Group)	90849	X	X	X	
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Evaluation and Management-Detailed-Established Patient 99213 X X X Evaluation and Management-Moderate-Established 99213 Detailed	· · · · · · · · · · · · · · · · · · ·	00212	v	v	v	
Patient 99213 X X X Evaluation and Management-Moderate-Established 99213 X		99212	^		^	
	Patient	99213	Χ	Х	X	
	· ·	99214	X	x		

Evaluation and Management-High-Established Patient	99215	Χ	X	X	
					Incorporated into Diagnostic
Alcohol and/or Drug Assessment	H0001				Assessment
Alcohol and/or Drug Screening	H0002	Χ	Χ	X	
Alcohol and/or Drug Individual Counseling	H0004	Х	Χ	X	
Alcohol and/or Drug Group Counseling	H0005	Χ	Χ	X	
Alcohol and/or Drug Intensive Outpatient	H0015		Χ	X	
Opioid Treatment	H0020		Χ	X	Methdone Only for Medicaid
Day Treatment for Individual Alcohol and/or Substance					
Abuse	T1008		X		
Outpat. Tx – Ind	Y2305	Χ	Х	Χ	Includes only individual counseling
Outpat. Tx – Gp	Y2306	Χ	X	Χ	
Case Management	Y2307				Incorporated into Community
Psy. Rehab	Y2313		Χ	X	
Assertive Comm Trmt Team	Y2314		Χ	X	
Facility Based Crisis Program	Y2315	Χ	Χ	Х	
Criteria #5	Y2343				
Family Type Resid TX (Level I)	Y2347		Х	Х	
HRIR III, 4 beds or less	Y2348		Χ	X	
HRIR III, 5 beds or more	Y2349		Х	Х	
HRIR IV, 4 beds or less	Y2360		Х	Х	
HRIR IV,5 beds or more	Y2361		Χ	X	
HRIR II, 4beds or less	Y2362		Χ	X	
HRIR II, 5 beds or more	Y2363		Х	Х	
CBS - Professional ECI - Individual	Y2364		Х	Х	
CBS - Professional ECI - Group of 2	Y2365		Χ	X	
CBS - Professional ECI - Group 3+	Y2366		Х	Х	
CBS - Professional - Individual	Y2367				Incorporated into Community
CBS - Professional - Group of 2	Y2368				Incorporated into Community
CBS - Professional - Group 3+	Y2369				Incorporated into Community
CBS - Paraprofessional - Individual	Y2370				Incorporated into Community
CBS - Paraprofessional - Group of 2	Y2371				Incorporated into Community
CBS - Paraprofessional - Group 3+	Y2372				Incorporated into Community
Hourly Respite	YA125		Х		· · · · · · · · · · · · · · · · · · ·
Community Respite	YA213		Х		
Psychiatric Residential Treatment Facility	YA230		X		
Room and Board - Level III (1-4 Beds)	YA232		X		
Room and Board - Level III (5+ Beds)	YA233		X		
Room and Board - Level II (Age 5 or less)	YA234		X		

Room and Board - Level II (Age 6-12)	YA235	X		
Room and Board - Level II (Age 13+)	YA236	Х		
Room and Board - Level IV (1-4 Beds)	YA237	X		
Room and Board - Level IV (5+ Beds)	YA238	Х		
Wilderness Camp	YA241	X		
Therapeutic Leave - Resid Level II - Therapeutic Foster				
Care	YA254	Х		
Therapeutic Leave - Residential Level II - Group Home	YA255	x		
Therapeutic Leave - Residential Level III (1-4 Beds)	YA256	X		
Therapeutic Leave - Residential Level III (5+ Beds)	YA257	X		
Therapeutic Leave - Residential Level IV (1-4 Beds)	YA258	X		
Therapeutic Leave - Residential Level IV (5+ Beds)	YA259	X		
Therapeutic Leave Room and Board - Level III (1-4	171200			
Beds)	YA263	X		
Therapeutic Leave Room and Board - Level III (5+				
Beds)	YA264	X		
Therapeutic Leave Room and Board - Level II (Age 5 or		v		
less)	YA265	X		
Therapeutic Leave Room and Board - Level II (Age 6-12)	VAGE	x		
12)	YA266	^		
Therapeutic Leave Room and Board - Level II (Age 13+)	YA267	X		
Therapeutic Leave Room and Board - Level IV (1-4				
Beds)	YA268	Х		
Therapeutic Leave Room and Board - Level IV (5+ Beds)	YA269	x		
Deus)	1 A 2 6 9	^		
Therapeutic Leave - Family Type Residential Tx (Level I)	YA347	X	Х	
Specialized Summer Program (WM)	YA370	Х		
Personal Care	YM050	Х		
Adapt Behav Training	YM550	X		
Social Inclusion	YM570	X		
Day Supports	YM580	Х		
Financial Support Services	YM600	Х		
Guardianship	YM686	Х		
Independent Living-MR/MI	YM700	Х		
Individual Supports	YM716			Incorporated into Community
Sup Liv – High	YM725	Х		
Alternative Family Living	YM746	Х		
Family Living – High	YM755	X		
Supported Living – Level 1	YM782	X		

Supported Living – Level 2	YM783		Χ		
Supported Living – Level 3	YM784		Χ		
Supported Living – Level 4	YM785		X		
Supervised Living – 1 Resident	YM811		X		
Supervised Living – 2 Resident	YM812		X		
Supervised Living – 3 Resident	YM813		X		
Supervised Living – 4 Resident	YM814		X		
Supervised Living – 5 Resident	YM815		X		
Supervised Living – 6 Resident	YM816		Х		
Residential Supports	YM850		X		
Hourly Respite – Individ	YP010		Х		
Hourly Respite – Group	YP011		Х		
Per Asst – Individ	YP020		Х		
In-Home Aide	YP060		Х		
CE&PP – Cons Ed Prim Prev	YP110		Х		
QA Peer Review	YP180				
Case Support	YP215			Ir	ncorporated into Community
Assert Outreach	YP230	Χ	Х		
Mandated Team Eval	YP340		Х		
Interpreter Services	YP450		X		
Interpreter Services-Other Language	YP460		Х		
Travel-Professional	YP498		Х		
Travel-Para-Professional	YP499		Х		
Dev Day	YP610		Х		
ADVP	YP620		X		
Sup Emp – Ind	YP630		Х		
Sup Emp – Group	YP640		Х		
Shelt. Wksp	YP650		Х		
Day Activity	YP660		Х		
Drop In – Attend	YP690		Х		
Drop In – Cover	YP692		X		
New Day Service	YP699				
Sup Liv – Low	YP710		Х		
Sup Liv – Mod.	YP720		Х		
Family Living – Low	YP740		Х		
Familiy Living – Mod	YP750		Х		
GP Liv – Low	YP760		Х		
GP Liv – Mod	YP770		Х		
GP Liv – Hi					

Detox – Soc Set	YP790		Х		
Inpat Hosp	YP820	Х	X		
Partial Hospitalization-Child	Y2311		Х	Х	
Partial Hospitalization-Adult	Y2312		Х	X	
Case Consultation	Y2305				Incorporated into Community
New Services					
Behavioral Health Prevention Education Services	H0025		X		
Community Support Individual and Group Child			X	Х	
Community Support Individual and Group Adult			Х	Х	
Intensive In-Home Services			Х	Х	
Multisystemic Therapy			Х	Х	
Crisis Management			Х	X	
Diagnostic/Assessment		Х	Х	Х	
Brief Substance Abuse Intervention		Х	Х	Х	
SA Comprehensive Outpatient Treatment Program			Х	X	
SA Intensive Outpatient Program			Х	X	
Transitional Independent Housing			Х		
Transitional Congregate Housing			Х		
SA Halfway House			Х	X	
Non-Medical Community Residential Treatment			Х	Х	
Medically Monitored Community Residential Tx			Х	X	
Inpatient HospitalSA Treatment			Х	X	